

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**

SERIAL NO. 1082315 2

FILING DATE 04/12/04

APPLICANT(S)

**CLAIMS**

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	1					
2		1				
3		1				
4		3				
5		3				
6		3				
7		3				
8		3				
9		3				
10		3				
11		3				
12		3				
13		3				
14		3				
15		3				
16		3				
17		3				
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28		3				
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30		3				
31		3				
32		3				
33		3				
34		3				
35		3				
36		3				
37		3				
38		3				
39		3				
40		3				
41		3				
42	1					
43		1				
44		1				
45		1				
46		2				
47		2				
48		2				
49		1				
50		1				
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

  

	IND	DEP	IND	DEP	IND	DEP
51		1				
52		2				
53		2				
54		2				
55		1				
56		1				
57		1				
58		1				
59		1				
60		1				
61		1				
62		1				
63		1				
64		1				
65		1				
66		1				
67		1				
68		4				
69		1				
70		1				
71		1				
72		1				
73		1				
74						
75						
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99						
100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						